Case 2:15-bk-50794 Doc 37-1 Filed 09/12/16 Entered 09/12/16 14:32:15 Desc Exhibit Page 1 of 4

Del	otor 1 Mykel Ham	ilton		_			
	otor 2 use, if filing)			_			
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF OHIO	_			
Cas	e number 2:15-bk-50794	Check	Check if this is:				
(If kr	own)		-	■ Ar	n amended filing		
					supplement showing postpetition chapte income as of the following date:		
0	fficial Form 106I			MI	M / DD/ YYYY		
S	chedule I: Your Inc	ome			12		
atta	ch a separate sheet to this form.	On the top of any additi			your spouse. If more space is needed mber (if known). Answer every questi		
atta Par	t 1: Describe Employment	On the top of any additi					
atta	Describe Employment Fill in your employment information.	On the top of any additi	Debtor 1		mber (if known). Answer every questi		
atta Par	Describe Employment Fill in your employment information. If you have more than one job,	On the top of any additi	onal pages, write your name	and case nu	mber (if known). Answer every questi Debtor 2 or non-filing spouse Employed		
atta Par	t1: Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional	On the top of any additi	Debtor 1	and case nu	mber (if known). Answer every questi		
atta Par	Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with	On the top of any additi	Debtor 1 Employed	and case nu	mber (if known). Answer every questi Debtor 2 or non-filing spouse Employed		
atta Par	t1: Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional	On the top of any additi	Debtor 1 Employed Not employed	and case nu	Debtor 2 or non-filling spouse Employed Not employed		
atta Par	Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	Employment status Occupation Employer's name	Debtor 1 Employed Not employed Flow Technician	and case nu	Debtor 2 or non-filing spouse Employed Not employed Stylist		
atta Par	Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Employment status Occupation Employer's name	Debtor 1 Employed Not employed Flow Technician West-Ward 401 Industrial Way West-Eatontown, NJ 07724	and case nu	Debtor 2 or non-filing spouse Employed Not employed Stylist Regis Corp.		
atta Par	Describe Employment Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.	Employment status Occupation Employer's name Employer's address How long employed t	Debtor 1 Employed Not employed Flow Technician West-Ward 401 Industrial Way West-Eatontown, NJ 07724	and case nu	Debtor 2 or non-filing spouse Employed Not employed Stylist Regis Corp. 7201 Metro Blvd. Minneapolis, MN 55439		

2,003.46

2,003.46

0.00

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. 2,883.03 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 3. +\$ Calculate gross Income. Add line 2 + line 3. 2,883.03

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	Mykel Hamilton		Ca	ase number (if known)	2	2:15-bk-507	794	
			='						
					For Debtor 1		For Debtor	2 0"	
					OI Debloi I		non-filing s		
	Copy	y line 4 here	4.	\$	2,883.03			003.46	<u> </u>
						-			_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	533.67	_	\$	466.04	<u> </u>
	5b.	Mandatory contributions for retirement plans	5b.			_	\$	0.00	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c.	\$		_	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.			_	\$ \$	0.00	_
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$		_	\$	0.00	_
	5g.	Union dues	5g.	\$	0.00		\$	0.00	
	5h.	Other deductions. Specify:	5h			_	\$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$		_	\$	466.04	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.					-		537.42	_
			7.	\$	2,020.90	-	Ψ	337.42	<u>-</u>
8.	8a.	all other income regularly received: Net income from rental property and from operating a business,							
	ou.	profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	0.00	1
	8b.	Interest and dividends	8b.			_	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent				-	·		
		regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		\$	0.00	1
	8d.	Unemployment compensation	8d.		0.00		\$	0.00	
	8e.	Social Security	8e.	\$		_	\$	0.00	
	8f.	Other government assistance that you regularly receive				-			_
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	:						
		Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$	0.00		\$	0.00)
	8g.	Pension or retirement income	8g.		0.00	_	\$	0.00	_
	8h.	Other monthly income. Specify:	_ 8h	+ \$	0.00	+	\$	0.00	<u></u>
0	A al al	all ather income. Add lines On Ob. On Od On Ob. On Ob.	0	Φ.	0.00	1 [Φ.		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00]	\$	0.0	U
40	0-1-	odata manthhain anns Add Par 7 Par 0	40 6		2 222 22		4 505 40		
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,020.96 + \$	_	1,537.42	= \$_	3,558.38
			. ∟						
11.		e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your		ndor	ate vour roommate	20	and		
		r friends or relatives.	uepei	iuei	its, your roominate	,,,	anu		
		ot include any amounts already included in lines 2-10 or amounts that are not	availal	ble t	to pay expenses lis	stec			
	Spec	oify:					_ 11.	+\$	0.00
12	Δдд	the amount in the last column of line 10 to the amount in line 11. The res	ult ic t	he r	combined monthly	inc	ome		
		e that amount on the Summary of Schedules and Statistical Summary of Certai					f it		0.550.00
	appli	es					12.	\$	3,558.38
								Combi	
10	D	and the first of the second se	^					month	ly income
13.	Do y ■	you expect an increase or decrease within the year after you file this form No.	•						
	_	Yes. Explain: Debtor's 401k loan ends in October 2015.							
		· · · · · · · · · · · · · · · · · Debior s 40 ik ioan ends in Uciober 2015.							1

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Fill	in this informa	tion to identify yo	our case.			I						
	otor 1	Mykel Hamil					k if this is: An amended filing					
Debtor 2 (Spouse, if filing)							A supplement showing postpetition chapter 13 expenses as of the following date:					
Unit	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO		-	MM / DD / YYYY					
	e number 2:	15-bk-50794										
		rm 106J				1						
Be info	as complete a ormation. If m mber (if know		possible eded, atta ry questio	If two married people ar ch another sheet to this								
1.	ls this a joir		.iioiu									
	■ No. Go to □ Yes. Doe	s Debtor 2 live	in a separ	ate household?								
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.					
2.	Do you have	e dependents?	■ No									
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state dependents							□ No				
	dependents	names.						□ Yes □ No				
								□Yes				
								□ No □ Yes				
								□ No				
								☐ Yes				
3.		penses include f people other t	han	No								
		d your depende		Yes								
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses								
Est exp	imate your ex	cpenses as of ye	our bankr	uptcy filing date unless y y is filed. If this is a supp								
the		h assistance an		government assistance in Sluded it on <i>Schedule I: Y</i>			Your exp	enses				
				_								
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4. \$		450.00				
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a. \$		0.00				
	•	rty, homeowner's				4b. \$		0.00				
			•	ipkeep expenses		4c. \$ 4d. \$		100.00 0.00				
5.								0.00				

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Debto	or 1	Mykel H	amilton		Ca	ase num	ber (if known)	2:15-bk-50794
6. l	Utiliti	ies:						
6	6a.	Electricity	, heat, natural gas			6a.	\$	250.00
6	6b.	Water, se	wer, garbage collec	etion		6b.		70.00
	6c.	Telephon	e, cell phone, Interr	net, satellite, and cable services		6c.		355.00
6	6d.	Other. Sp	ecify:			6d.		0.00
7. I	Food	and hous	ekeeping supplies	5		7.	\$	550.00
i. (Child	dcare and	children's educati	on costs		8.	\$	0.00
. (Cloth	ning, laund	iry, and dry cleani	ng		9.	\$	100.00
0. I	Pers	onal care	products and serv	ices		10.	\$	100.00
1. I	Medi	ical and de	ental expenses			11.	\$	150.00
				tenance, bus or train fare.				200.00
			ar payments.			12.		320.00
				newspapers, magazines, and be	ooks	13.		150.00
4. (Char	itable con	tributions and reli	gious donations		14.	\$	0.00
		rance.						
				from your pay or included in lines	4 or 20.	45-	•	
		Life insur				15a.	· -	0.00
		Health in				15b.	·	0.00
		Vehicle in				15c.		180.00
			urance. Specify:			_ 15d.	\$	0.00
			nclude taxes deduc	ted from your pay or included in lin	nes 4 or 20.	10	Φ	
	Spec					_ 16.	Ф	0.00
			lease payments:			170	ф	460.00
			ents for Vehicle 1 ents for Vehicle 2			17a.		460.00
		. ,				17b.		0.00
			ecify: Spouse's	car payment		17c.	*	300.00
		Other. Sp				_ 17d.	\$	0.00
				tenance, and support that you di i, <i>Schedule I, Your Income</i> (Offic		18.	\$	0.00
				pport others who do not live with			\$	0.00
	Spec		o you make to our	port outlote with do not not me	. you.	19.	<u> </u>	0.00
		·	erty expenses no	included in lines 4 or 5 of this f	orm or on Schedu	_	ur Income.	
			s on other property			20a.		0.00
		Real esta				20b.		0.00
			homeowner's, or re	enter's insurance		20c.	· -	0.00
			nce, repair, and upl			20d.		0.00
				condominium dues		20e.	·	0.00
		r: Specify:		condominan dues		21.	•	0.00
	Othe	a. opechy.					ΤΨ	0.00
22. (Calcu	ulate your	monthly expenses	\$				
			through 21.				\$	3,535.00
2	22b. (Copy line 2	22 (monthly expense	es for Debtor 2), if any, from Officia	al Form 106J-2		\$	
2	22c. /	Add line 22	a and 22b. The re	sult is your monthly expenses.			\$	3,535.00
								<u> </u>
			monthly net incor				•	
			1,5	monthly income) from Schedule I.		23a.		3,558.38
2	23b.	Copy you	r monthly expenses	from line 22c above.		23b.	-\$	3,535.00
	00	0.1.	,					
2	23c.			ses from your monthly income.		23c.	\$	23.38
		rne resul	t is your <i>monthly ne</i>	и інсоте.		200.	т	20.00
F	For ex	xample, do y		crease in your expenses within t ring for your car loan within the year or ge?				ease or decrease because of a
_	■ No		,9	-				
	— 130 □ Ye	-	Explain here:					
ı	u Ye	es.	Ехріаін пеге.					

— 110.	
☐ Yes.	Explain here: